24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Trusted Leadership PAC	C C00609511
	C 200009311
Check if X 24-hour report 48-hour report New report Amends report filed	i on M M / D D / Y Y Y Y Y
Full Name of Payee Frontline Political Strategy	Date of Public Distribution/Dissemination
o,	04 DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2830 S Hulen St	Amount
#365 City State Zip Code	54000.00
City State Zip Code Fort Worth TX 76109	Transaction ID : SE.4645 Date of Disbursement or Obligation
Purpose of Expenditure Door-to-Door; Telephone Calls and other GOTV effort Category/ Type 004	04 27 2016
Name of Federal Candidate Support Office	e Sought: House District: 00
RAFAEL EDWARD 'TED' CRUZ	President Senate State: IN
Calendar Year-To-Date Per Election for Office Sought Disbute 2016	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	Amount
City State Zip Code	
State Lip code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	W = W / D = D / Y = Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General
Tel Election for Office Sought	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	54000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 7 7
(c) TOTAL Independent Expenditures	54000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
24.0	04 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	